Guidance Document: 60-11 Revised: September 12, 2008

Virginia Board of Dentistry

Guidance on Periodontal Diagnosis and Treatment

The Board has the following recommendations to assist the general dentist in the application of periodontal diagnosis and treatment:

Plaque Associated Gingivitis

Plaque associated gingivitis is defined as inflammation of the gingival in the absence of clinical attachment loss. Gingivitis may be characterized by presence of any of the following clinical signs:

- Redness and edema of the gingival tissue
- Bleeding upon provocation
- Changes in contour and consistency
- Presence of calculus and/or plaque
- No radiographic evidence of crestal bone loss

Adult Periodontitis

Adult periodontitis is defined as inflammation of the gingival and the adjacent attachment apparatus. The disease is characterized by loss of clinical attachment due to destruction of the periodontal ligament and loss of the adjacent supporting bone. Clinical features may include combinations of the following signs and symptoms:

- Edema
- Erythema
- Gingival bleeding upon probing and/or suppuration
- Slight or moderate destruction demonstrates a loss of up to 1/3 of the supporting periodontal tissues and is generally characterized by periodontal probing depths up to 6mm (with clinical attachment loss of up to 5mm)
- Radiographic evidence of bone loss
- Increased tooth mobility may be present

Treatment Considerations

Treatment plans for plaque associated gingivitis or adult periodontitis include patient education, customized oral hygiene instruction and debridement of tooth surfaces to remove supra/subgingival plaque and calculus.

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Adult periodontitis may require additional treatment modalities including resective, regenerative procedures, occusal therapies, selective extraction of teeth and various types of implant and prosthetic treatments.

Patients with mild inflammation of the marginal tissue, minimal calculus, little or no clinical evidence of attachment loss and insignificant probable depths (3.0mm) are not candidates for multiple visits of root planing/scaling.